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# Parental Expectations About Adapted Physical Education Services

Holly Chaapel<sup>1</sup>, Luis Columna<sup>2</sup>, Rebecca Lytle<sup>3</sup>, and JoEllen Bailey<sup>1</sup>

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## Abstract

The purpose of this study was to characterize the expectations of parents of children with disabilities regarding adapted physical education services. Participants ( $N = 10$ ) were parents of children with disabilities. Parents participated in one-on-one semistructured interviews. Transcripts were analyzed through a constant comparative method. Three parental themes emerged from the analysis: (a) importance placed on physical activities, (b) ongoing and frequent communication and collaboration, and (c) teachers' attributes. The results of this study demonstrated that parents wanted more communication with the adapted physical education teacher, a collaborative working relationship, attendance of the adapted physical education teacher at Individual Education Program meetings, and normalcy for their child.

## Keywords

adapted physical education, collaboration, communication, parents, special education

In 2009, the U.S. Department of Education estimated that approximately 5.8 million of the nation's schoolchildren, ages 6 to 21 years, were receiving special education services through the Individuals With Disabilities Education Improvement Act (IDEIA) of 2004 (Sec. 650 [1] [11] [B]). This law mandates that students with disabilities have the right to receive a free appropriate public education (FAPE) in the least restrictive environment (LRE). According to IDEIA, physical education is required for all students who qualify for special education. This law stresses that physical education must be provided to all students, irrespective of disability status. Students who cannot safely and successfully participate in the general physical education (GPE) environment must be provided physical education by a qualified adapted physical activity educator (Lytle, Lavay, & Rizzo, 2010). Therefore, careful consideration to the services provided to children with disabilities regarding physical education or adapted physical education needs to be afforded.

The interests and needs of the students with disabilities and their families should be considered when developing a sound physical education program. Parents play a critical role on the Individual Education Program (IEP) team and in transition planning. For this reason, it is important to understand the expectations parents of children with disabilities have toward adapted physical education services. Hence, the purpose of this study was to identify the expectations of parents of children with disabilities regarding adapted physical education services.

When parental expectations are recognized, the needs of children with disabilities and their families are more likely to be met (Downing & Rebollo, 1999). Federal mandates make it clear that parents are to be an integral part of the educational team, and previous research in special education has discussed the important role of parents (Madson-Ankeny, Wilkins, & Spain, 2009; Russell, 2005). Little research has been conducted to specifically examine the needs of parents related to adapted physical education services. In fact, many parents may not even know that physical education is a required content area (Columna et al., 2008).

Fidler, Lawson, and Hodapp (2003) explored the wishes of parents of children with three different genetic disorders, Down's syndrome, Prader-Willi syndrome, and Williams syndrome, regarding educational programming for their children. The authors' intent was to explore ways to improve their child's current educational program. Fidler et al. found that parents' priorities for their child depend on

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the child's disability. For example, parents of children with Down's syndrome expressed a desire for more speech therapy services and reading instruction for their children, parents of children with Williams syndrome expressed a desire for more music instruction and instructional assistants in the classroom for their children, and parents of children with Prader-Willi syndrome wanted more adapted physical education services for their children. Results of this study demonstrated that parental priorities are often based on educational needs or desires. For example, parents of children with Down's syndrome expressed a desire for speech therapy because they felt it was an important social skill that their children needed to be successful in an integrated setting, whereas physical education was a priority for parents of children with Prader-Willi syndrome due to the fact that one of the characteristics of this syndrome is the prevalence of obesity. Fidler et al. further concluded that by acknowledging parental expectations, professionals can develop programs that are more in alignment with parental goals and desired outcomes for their children. In addition, communication with parents provides an opportunity to explore their knowledge regarding the child's disability and potential special education services.

Downing and Rebollo (1999) conducted a research study to explore parents' perceptions of the factors essential for integrated physical education programs. A 21-question survey was distributed to parents ( $n = 100$ ) of children with physical disabilities in mainstreamed classes across six different elementary schools in the United States. Researchers found that parents wanted their children to be educated in inclusive physical education programs, participate in balance and coordination activities, learn gross motor skills, and become physically fit. These results illustrated the need for inclusion in physical education and the importance of skill acquisition through specific gross motor goals. These authors stated that obtaining information regarding parental desires for the child was imperative to development of the child's educational program.

A more recent study looked specifically at parent involvement with programming related to physical education. An and Goodwin (2007) investigated the perceptions of parents in regard to their child's physical education. This study, conducted with mothers of children with spina bifida ( $n = 7$ ), examined perceptions of the child's physical education program and the importance of the IEP in home and school communication. These mothers valued their children's participation in physical education and provided support to teachers. The results of this study indicated that parents preferred to be involved in their child's physical education program and to share information with the physical education teacher. The authors further concluded that the information shared by mothers was related to activity modifications physical education teachers could utilize with the children. Parents voiced the importance of the IEP meetings as a great

venue for sharing information regarding the educational future of their child. During the IEP meetings, participants in this study provided ideas that physical education teachers could then use to successfully include the children with spina bifida into the physical education setting.

Despite the importance parents placed on the IEP meetings, it has been reported that adapted and physical education teachers often do not attend these meetings (Kowalski, Lieberman, & Daggett, 2006). GPE teachers do not consistently heed to IEP documents before implementing physical education services, and many may not have attended the IEP meeting. This detail may be due to the lack of communication or to the physical educator's need to attend to other responsibilities (M. Pope, personal communication, August 17, 2009). By attending the IEP meeting, adapted physical education teachers are not only meeting parental expectations but also assisting in the writing of IEP goals for skill development and effective learning objectives aligned to the general education curriculum.

Goals and objectives should be aligned not only with the general education curriculum but should also be focused on learning outcomes that will foster physical activity and inclusion outside of school and after graduation. One goal of adapted physical education is for students with disabilities to transfer the skills they learned in the gym environment to the community. However, families of children with disabilities often encounter barriers that prevent participation in recreational activities (e.g., lack of knowledge of how to modify activities, lack of time; An & Goodwin, 2007; Castaneda, & Sherrill, 1999). Parent expectations toward their child's transition from home to school and from school to community can be fraught with uncertainty (Russell, 2005).

Russell (2005) explored the expectations of families regarding transitions. The findings indicated that parents' expectations were (a) for their child to make progress in school, (b) for parents to obtain support, and (c) to acquire information from professionals regarding the transition process. According to Russell, parents developed their expectations based on previous experience, information provided by the school system, and formal networks of professionals.

In the field of adapted physical education, Roth, Pyfer, and Huettig (2007) investigated the perceived impact of physical activity transition programming on individuals with cognitive disabilities. They conducted focus groups with 23 parents of young adult graduates ranging in age from 22 to 25 years. The authors found that while at school, students had ample opportunities to be involved in physical activities, but physical activity participation was significantly attenuated after graduation. According to the authors, parents felt unprepared to provide physical activity opportunities for their children after graduation. For these reasons, parents voiced a need for parental training regarding physical activity opportunities after high school.

**Table 1.** Participant Demographics.

Participant	Participant	Child's gender	Child's age (years)	Child's disability	Child lives with
1	Mother	M	3.5	AU	Both parents
2	Mother	F	7	AU	Both parents
3	Mother	M	11	CP	Both parents
4	Mother/father	M	7	DS	Both parents
5	Mother	M	20	AU	Mother
6	Mother	M	6	PDD-NOS	Both parents
7	Mother	F	11	BL/OCD/AS	Both parents
8	Father	F	4	DS	Both parents
9	Mother/father	F	5	DS	Both parents
10	Mother	M	8	DD	Mother

Note. M = male; AU = autism; F = female; CP = cerebral palsy; DS = Down's syndrome; PDD-NOS = pervasive developmental disorder—not otherwise specified; BL = blindness; OCD = obsessive-compulsive disorder; AS = Asperger syndrome; DD = developmental disability.

Parents' needs, desires, and perceptions about physical activity, its role for the family and child with a disability, and expectations of those providing such a service are important to explore for continued improvement and efficacy of GPE programs. In a previous study (Columna et al., 2008), researchers found that Hispanic parents wanted more communication with the adapted physical education teacher. Parents expressed a desire to learn physical activities that they could do at home with their children. They also expressed a concern regarding transitions from one grade to the next and from school to community programs (natural transition points). Finally, Hispanic parents felt that these transitions were not typically smooth and that there was a lack of continuity from recreational and sport activities taught in school to activities available in the community.

Physical education and adapted physical education teachers should have an understanding of the needs, desires, and expectations of parents of children with disabilities to provide quality and effective programming (An & Goodwin, 2007; Columna et al., 2008; Roth et al., 2007; Russell, 2005). The field of physical and adapted physical education is in need of research that indicates how physical education and adapted physical education teachers can better support parents. This study sought to expand the body of literature by answering the following specific research questions:

*Research Question 1:* What are the expectations of parents of children with disabilities in regard to physical activity?

*Research Question 2:* What are the expectations of parents of children with disabilities about the professionals providing adapted physical education?

*Research Question 3:* What are the expectations of parents regarding physical education transition planning for their child with a disability?

## Method

### Participants

Prior to the selection of the participants, approval from the Institutional Review Board (IRB) office was obtained. A convenience sampling was used to identify possible candidates to participate in this study (Creswell, 2003). The criteria required participants to be a parent of a child, ages 3 to 20 years, with some type of physical, intellectual, or emotional disability. The wide range of ages allowed for exploration of similarities and differences between parents of younger children and parents of older children. The selected participants were parents ( $N = 10$ ) of children with congenital or acquired disabilities, who participated in an adapted physical education program and/or received adapted physical education services in a local school district in central New York. The children from this study came from a variety of schools and each had different physical education teachers. Demographic information of the participants and their children is presented in Tables 1 and 2.

The primary investigator (PI) explained the purpose of the study to each candidate. If the parent showed interest in participating, a meeting was arranged to obtain consent to participate and conduct the interviews at a preferred location selected by the participant. Each interview lasted approximately 60 to 75 min. All interviews were recorded via audiotape to ensure accuracy of the interviews, which were then transcribed by the PI.

### Data Collection

A qualitative research design was used to conduct this study. Qualitative research provides the basis for examining direct experience and is used in the understanding of a phenomenon (Creswell, 2003). Data were collected from each participant in two ways: (a) completion of a personal data sheet and (b) an interview protocol with specific questions. The

**Table 2.** Income, Additional Children, Education, and Employment.

Participant number	Family income	Additional children	Mother's education	Father's education	Mother's employment	Father's employment
1	US\$75,000–US\$99,999	2	Graduate degree	College/university	Full-time out of home	Full-time out of home
2	US\$45,000–US\$74,999	1	Technical college	College/university	Full-time at home	Full-time out of home
3	More than US\$100,000	2	College/university	College/university	Home-based business	Full-time out of home
4	US\$75,000–US\$99,999	2	High school	College/university	Unemployed	Full-time out of home
5	US\$10,000–US\$24,999	1	High school	NA	Full-time out of home	NA
6	US\$45,000–US\$74,000	2	College/university	Technical college	Full-time out of home	Full-time out of home
7	Over US\$100,000	2	Graduate school	College/university	Unemployed	Full-time out of home
8	US\$75,000–US\$99,999	2	Graduate school	Some graduate school	Full-time out of home	Full-time out of home
9	US\$75,000–US\$99,999	1	College/university	Technical college	Full-time out of home	Full-time out of home
10	US\$30,000–US\$44,999	1	Graduate school	NA	Full-time out of home	NA

personal data sheet consisted of short questions to obtain demographic data, including age of the child, family composition (i.e., single parent, two parents), parental employment, parental education, family income, and number of family members living in the same residence. Participants' names were not listed on the data sheet, and a code number was used to avoid identification of the participant.

Qualitative data were gathered through one-on-one semi-structured interviews. The selection of questions was developed following an extensive literature review (An & Goodwin, 2007; Columna et al., 2008; Downing & Rebollo, 1999). To ensure content validity, a panel of experts that consisted of higher education professors in the field of adapted physical education reviewed the interview questions. Based on their recommendations, the principal investigator made changes and redistributed the instrument to the panel for final review and approval. Items developed and approved by the expert consensus included the following: (a) What are your expectations for the professionals providing adapted physical education services for your child? (b) What outcomes tied to physical activity do you hope your child will demonstrate? (c) What are your hopes regarding leisure, recreation, fitness, and sports as a part of your family routine? (d) What are your expectations regarding your child's ability to access and enjoy community-based leisure, recreation, and sports programs? and (e) What are or were your hopes regarding your child's transition into the school system regarding physical education? Follow-up probing questions were administered based on participants' responses.

## Data Analysis

Constant comparative analysis was used to analyze the interview transcripts. This method of analysis required the researcher to take one piece of data (i.e., one interview, one statement, or one theme) and compare it with all other pieces of data that were either similar or different (Creswell, 2003). This process required reading the transcripts numerous times and conducting a line-by-line analysis. Revealing phrases were highlighted and coded with meaningful labels. The data analysis started with a coding process and continued by constantly comparing phrases to determine whether they should be classified separately or whether they belonged to an existing code (Creswell, 2003). Codes that were conceptually similar were gathered together into thematic statements, giving fundamental meaning to the experiences (Patton, 2001). Subsequently, the study's essential themes were determined.

## Validation of the Findings

**Trustworthiness.** To ensure trustworthiness of the data, several methods of triangulation were employed. Once the transcriptions were available, they were returned to the participants for member checking to ensure that the information collected was accurate. Of the 10 participants, 6 gave feedback to the PI, 2 suggested no changes, and 2 were not able to be contacted. The aim was to ensure a rich and accurate description of the data (Creswell, 2003). In addition to member checks, a



peer debriefing process was conducted. The transcripts were analyzed by multiple researchers (consisting of two Caucasian females and one Hispanic male). Initially, the researchers analyzed the data independently of one another and, subsequently, reanalyzed the data as a group to reach consensus. Words, phrases, and ideas were coded and then placed into broader categories or themes. Researchers generated a list of topics from interview transcripts based on individual participant responses. Last, the researchers then utilized an external reviewer who reviewed the themes to make sure they reflected the purpose of the study and the research questions.

## Results

The purpose of this study was to characterize the expectations of parents of children with disabilities regarding adapted physical education services. This study aimed to answer the following three research questions: (a) What are the expectations of parents of children with disabilities in regard to physical activity? (b) What are the expectations of parents of children with disabilities about the professionals providing adapted physical education? and (c) What are the expectations of parents regarding physical education transition planning for their child with a disability? Through the data analysis, three themes emerged: (a) importance placed on physical activities, (b) ongoing and frequent communication and collaboration, and (c) teachers' attributes.

### *Theme 1: Importance Placed on Physical Activities*

Parents expressed that they were always looking for additional and novel physical activities to do as a family. They indicated that adapted physical education was a great venue to learn about physical activities. The focus of physical activity needs varied by the age of the child. It was evident in the current study that parents of younger children (elementary school) and parents of older children (high school) had different physical recreational goals for their children's future. The parents of younger children wanted their child to improve fine motor and fundamental gross motor skills such as running and jumping, whereas parents of older children placed more importance on fitness and health. Participant 8, a father of a 4-year-old girl with Down's syndrome expressed the following:

I would love to see her progress with running and jumping and the fact that she is able to explore different physical activity and to experience the joy that comes with movement. Cognitively I'm hoping that because her IQ is pretty high . . . she is able to understand and . . . mostly be able to express her desires to do things.

Participant 5, a mother of a 20-year-old male with autism indicated, "I want him to become more physically fit, because I do worry about his health that way. I would love to put him in any kind of program that has physical fitness in it." Another parent (Participant 7) stated that recreational activities for her 11-year-old daughter became more limited, not only due to her visual impairment but also due to her age. The mother had a difficult time finding activities and programs in the area where they lived that were accommodating for her daughter. She wanted to teach her daughter lifelong fitness such as swimming and using the treadmill and/or elliptical machines:

Ideally I would love if there were a goal ball [sport for the visually impaired] team that she can be on and be part of the team. She is on a swim team and that is wonderful. It is great for her fitness but I guess realistically my goal is that she learns how to use exercise equipment that she will be able to manage independently as an adult, such as the treadmill.

Parents who highly valued physical activities expressed a desire to see their children play in the same environment and on the same sport teams as children without disabilities. Participant 10 uniquely stated that she wanted her child to be able to function and participate in a "normal setting" with "normal" peers:

I would love to be a soccer mom . . . I want my child to play on the team . . . watch him be able to sit on the bench when he is not playing. When he is on a little league team I want to watch my kid strike out. I want him to get up to bat . . . that's all I want him to do is to get up to bat.

Although most parents, as summarized by Participant 10, wanted their children to be involved in recreational programs like other children, Participant 1 demonstrated overprotection of her child when it came to participation in physical activities. Due to this overprotection, her child had limited opportunities to be involved in recreational physical activities. Participant 1 mentioned that it was the uncertainty of how her son would act that prevented her from getting him involved in activities. She also stated that she was often exhausted and tired after he had "meltdowns" during activities. She wanted to avoid these situations rather than to deal with the ramifications. This mother expressed her feelings about taking her child to recreational events when she said, "Some of it I think is fear on our part, because sometimes when he is introduced to new things he gets very upset, and I think we find ourselves not doing some things that we could do." When working with a parent who may have similar experiences similar to Participant 1, teachers may have difficulty promoting physical

activity. Parents may overprotect their children to avoid them getting hurt, or they may experience fears of what could happen if their child is not successful or has behavioral challenges.

Although parents wanted their children to be physically active as a lifestyle for inclusion and health, they often did not look to the school-adapted physical education services for assistance for many reasons. Similar to other parents, Participant 2 indicated that she would like to see her son participate in activities with his same age peers. However, a mother of a child with autism did not see physical activity as a priority, because other aspects of life were taking precedent. When she was asked about her expectations for her child in terms of physical activity and adapted physical education, Participant 2 voiced, "You get so caught up in the speech teacher and even the OT." Participant 1 also added a similar sentiment:

I am a very well educated person, but APE was clearly a missing piece. It [APE] wasn't on my radar . . . I think life sometimes just gets in the way . . . I think in our lives, physical activity takes a back burner . . . it seems that the cognitive part is more of a priority.

Results of the current study demonstrated that some parents placed physical activity and adapted physical education services on the "back burner" for a number of reasons: whether it was because other special education services were a priority or they had limited awareness of adapted physical education. However, parents still wanted normalcy for their children. Parents wanted their children to participate in regular activities alongside similar age peers.

### ***Theme 2: Ongoing and Frequent Communication and Collaboration***

Parents shared several expectations toward adapted physical teachers; one such expectation was the need for ongoing communication. Parents shared a lack of communication from adapted physical education teachers as one of their primary concerns. Because of this lapse, parents were typically unaware of what their child was doing in physical education. In the current study, parents wanted more communication between home and school, specifically with the adapted physical education teacher. With better communication, they could reinforce at home what was taught in school.

An additional reason for expressing a desire for ongoing communication with teachers was due to the fact that parents perceived that they were not the expert in identifying recreational activities and games they could do with their child. Participant 3 expressed the need for advice from an expert. She compared the expertise of an adapted physical education teacher with the abilities of an interior decorator, stating,

Maybe somebody who is up on the latest and greatest . . . as a parent . . . you can't always see the end because it's hard. Just like it's hard to decorate your own house, it is easy to do somebody else's . . . you are not used to the same things so it's nice to get somebody else's opinion.

In many cases, even though parents had the best intentions, they did not know how to create "fun and exciting" play environments for their children. Participant 3 believed that the adapted physical education teachers should communicate with parents to find out what activities the family liked to participate in at home. They could then work together to improve these skills. This participant commented,

If somebody is working with him at school and is not communicating well with me and if they understand what's going on at home with family . . . if the APE teacher communicated with the parent to get information about what physical activities that the parents like to do . . . what type of sports they are involved . . . so that they can maybe help us figure out how to involve the child.

Parents indicated that they wanted to initiate communication with professionals, including adapted physical education teachers, and assume an active role in the educational future of their child. However, Participant 1 indicated that she lacked the knowledge to ask appropriate questions regarding the educational future of her child. She stated, "I think giving us ideas of what to do, because sometimes it's not that you don't want to do it but you don't really know the questions to ask or you don't know what to do." Of 10 participants, 7 voiced a similar concern about gaining information.

An essential component to quality physical education is effective communication with parents. This interaction allows for the exchange of information regarding students' performance. Parents indicated that the primary source of information regarding educational and recreational opportunities for their child was typically the case manager and not the adapted or physical education teacher. However, parents questioned the knowledge and qualifications of the case manager regarding recreational programs. Parents indicated that they wanted the adapted physical education teacher to share information regarding accessibility of recreational community programs. They wanted to receive information related to dates, applications, contact personnel, and locations of specific programs and facilities.

Parents believed that IEP meetings provided a good opportunity to interact with teachers and share ideas on effective strategies to include their children in recreational programs. However, Participant 2 voiced concern that the adapted physical education teacher did not attend the

parent-teacher conference meetings, and for this reason she never talked to him. Parents perceived the adapted physical education teacher's absence from IEP meetings as a lack of commitment, which frustrated them. Participant 1 shared, "One of the frustrations about the system . . . is that they [adapted physical education teachers] don't offer much information to you, and if I don't know what the question is, how am I supposed to ask." According to Participant 1, some of these frustrations could be eliminated and her questions could be answered if the adapted or physical education teacher would attend the IEP meetings. Participant 9 further indicated, "You never see the physical education teacher, and actually I think that's a great thing to bring up, they should be there, at least at one of the meetings."

Although a majority of parents declared a lack of communication with the adapted physical education teacher, Participant 7 had a different experience with her adapted physical education teacher. She shared,

It's one individual who has gone above and beyond my expectations. She [APE teacher] communicates with me through a folder and lets me know what the plan is. She sends it home in print and in Braille . . . we have it posted at home to see what her exercise plan is, so she can be practicing it or going through the routine. We can reinforce those skills taught at school at home . . . it's really neat that her teacher thought to have asked my daughter's aide to Braille it up . . . it really helps because once again it puts it back on my daughter.

As mentioned by Participant 7, her daughter's adapted physical education teachers not only communicate with them but also provide ideas of activities they can practice at home. Parents expected APE teachers to demonstrate these practices. However, because many adapted and physical education teachers did not attend the IEP meetings, parents were relying on case managers to give and receive information.

Parents wanted everyone, including themselves and the adapted physical education teachers, to all be working collaboratively toward the same goals for their child. Participants stressed that school professionals needed to work closely with the parents and with other professionals for the child to be successful in all areas: academic, social, emotional, and physical development. According to parents, this meant "to be part of the team."

Participant 1 explained what being part of the team meant to her. "You need to be connected with the parents, the speech therapist, occupational therapist, psychologist, and when you meet during the IEP meetings be part of that." This mother perceived a lack of connection between parents and schools, parents and adapted physical education teachers, and professionals with other professionals. Participants

3 and 10 also believed that when parents and educators work in collaboration, the educational future of the child will flourish. When asked about the importance of effective teaming, Participant 10 declared,

So we are all on the same page, and we know what we are working towards. If there are 10 different people working towards different things then nobody is going in the same direction . . . when that happens . . . you are wasting time.

Participant 10 wanted the adapted physical education teacher to contact her when there were difficulties with her child. She indicated,

Adapted physical education teachers need to know that they cannot be afraid of parents . . . parents are only going to be there as long as they use them as an ally. Don't be afraid, don't be afraid, and don't be afraid.

Participant 3 was frustrated by the fact that her child's adapted physical education teacher never came to a meeting and was never involved even though her child qualified to receive adapted physical education services. In fact, her son did not have goals on his IEP for physical education. According to Participant 3, the IEP goals related to physical activity (or movement) were developed by the school's occupational and physical therapist and not by the adapted physical education teacher. This mother further indicated that for parents and the adapted physical education teacher to be part of the team, they both needed to attend the IEP meetings. Parents in the current study were very clear in their desire for effective team communication to support the educational needs for their children.

When parents and school professionals are not on the same page, communication and educational progress were affected, along with the transition process. Many of the participating parents found transition to be a "scary" concept. Parents frequently did not know what to expect when their child was making a transition from one program to another. Participant 9 mentioned,

I hope everything runs smoothly. We have already run into a problem with an aide and had to get a replacement aide for PE. I just hope that the school is as supportive as they can be. So far . . . it has been a nice transition from preschool to the elementary school.

When asked what the adapted physical education teacher can do to help make the transition smooth, this mother mentioned, "I think that if they [APE teachers] are involved . . . get as many people as possible to be involved and know what is going on, and even have monthly meetings."



Several parents revealed that they did not want to think about the transition process. Participant 1 remarked, "I haven't gotten that far because of what it takes to live with him day to day. I haven't been able to plan that far ahead." When asked about transition, Participant 2 responded: "Blah blah blah blah, I don't want to know."

Participants shared that one way to help alleviate their feelings of fear toward transition was for school professionals to promote a well-orchestrated transition for the child. Participant 3 made the following suggestion that could assist in the process:

Communication is the biggest . . . If there has to be new people . . . then those new people can come and observe periodically at the end of the previous school year and get to know my child and become familiar with him.

Participant 3 further indicated that at the end of the previous school year, her son's classroom teacher made a book with the names and pictures of other students and teachers in his class for him to take home. At home, they would use the book like flashcards to become familiar with the other students and teachers for the following school year. This mother said that the book of pictures and names helped her son with the transition process from one class to the next each year.

### *Theme 3: Teachers' Attributes*

Along with the need for effective communication, parents also expected adapted physical education professionals to be highly competent in teaching children with disabilities. In addition, these parents expressed a variety of teachers' attributes they felt were critical in working with their children. Participant 9 commented,

Be educated on all disabilities . . . because they have to know that even though someone has autism, another person with autism is going to be completely different . . . make sure that you know all about these types of things that kids have and make sure that you know that everybody is an individual.

In addition to being knowledgeable about the unique characteristics of each disability, Participant 8 added that adapted physical education teachers must be able to assess the abilities and individual needs of students and develop programs that meet those needs. She stated,

Assess functional abilities to chart out a plan of her progress and to achieve the next level . . . keeping up with her peers and to know where she should be at on an age appropriate scale and help her with her functional abilities.

All parents emphasized the following as desirable characteristics: caring, creative, fun, engaged, motivated, respectful, personable, and open minded. When adapted and physical education teachers possessed these characteristics, parents reported feeling more comfortable and more confident in their child's education. Participant 1 shared that for parents to feel that the adapted education teacher cares about their child, the teacher needs to demonstrate that each student is important to him or her. This mother stated, "he doesn't have to be the favorite but to know that you care enough about him to know who he is, what he likes, what he doesn't like, that is important."

Parents voiced that one of the ways adapted physical education teachers could demonstrate that they care for their students is by having patience while working with the child. Participants 2 and 7 could not have emphasized this attribute enough. Participant 7 indicated, "without patience, not only will the child struggle, but the teacher will struggle as well."

## **Discussion**

Results of the current study demonstrated that parents may have different priorities or expectations when it comes to physical activity and/or adapted physical education services. In some instances, parents perceived themselves as not having the qualifications to provide recreational opportunities for their children. For this reason, they voiced a desire for more communication with adapted physical education teachers. According to parents, if there was effective communication, they perceived teachers as caring and respectful of families' needs and expectations. Parents in the current study articulated a longing to work with the adapted physical education teacher to enhance the educational future for their child with a disability. For this to be accomplished, parents wanted all educators to be a part of the team and attend IEP and transition meetings where goals and decisions were made. This study sought to answer the following three research questions: (a) What are the expectations of parents of children with disabilities in regard to physical activity? (b) What are the expectations of parents of children with disabilities about the professionals providing adapted physical education? and (c) What are the expectations of parents regarding physical education transition planning for their child with a disability?

The discussion section is organized under the following headings related to parental expectations regarding (a) physical activity, (b) adapted physical education services, (c) adapted physical education teachers, and (d) IEP meetings and transition process.

### *Parental Expectations Toward Physical Activity*

Participants expressed varying levels of focus and importance on physical activity depending on the age of the child

and the nature of their disability. For example, parents of younger children believed that by participating in physical activity, their children would improve their motor skills, and as they grew older, they would improve their overall health and fitness level. Downing and Rebollo (1999) also found that parents wanted children to learn basic motor skills for lifetime physical activities. Parents in both studies had difficulty finding recreational or physical education programs for their children.

A common expectation voiced by participants was for their children with disabilities to participate with their non-disabled peers in physical activities, but there typically were not enough opportunities. In addition, parents reported a lack of knowledge of how to make modifications to enable their children to participate in physical activities. Similar findings were reported by Columna et al. (2008) among Hispanic families of children with disabilities. They too found that parents wanted more communications and more ideas on how to help their children be physically active in the community.

### *Parental Expectations of Adapted Physical Education Services*

Despite the multiple benefits of physical activity, some parents were not aware of adapted physical education services or did not focus on adapted physical education services because they were busy with other programming needs such as speech or occupational therapy. For one parent of a child with autism, behavior was the biggest priority. For another parent of a child with autism, speech and occupational therapy were the primary concerns. However, a parent of a child with a visual impairment wanted physical activity for her daughter, but a lack of opportunities made this very difficult. In another scenario, a parent of a young adult who was obese placed a high priority on physical activity. These findings support those reported by Fidler et al. (2003) that parents' priorities for their child varied based on the child's disability and factors related to the disability. Overall, parents desired school programming to be individualized to fit the child's personal needs. The fact that some parents were not aware of adapted physical education services is concerning in light of the fact that individuals with disabilities are at an even higher risk of diabetes and obesity as they move into adulthood due to the lack of physical activity.

### *Parental Expectations of Adapted Physical Education Teachers*

One of the expectations parents expressed regarding adapted physical education teachers was for them to be knowledgeable regarding appropriate educational practices. In addition, parents highlighted the desired characteristics of patience, a caring personality, and ongoing

communication with parents. These competencies are also identified by the Adapted Physical Activity Council (APAC) of the American Association for Physical Activity and Recreation (AAPAR) and the National Consortium for Physical Education and Recreation for Individuals With Disabilities (NCPERID) as characteristics of a highly qualified adapted physical education teacher. AAPAR and NCPERID place vast importance on communication skills exhibited by professionals.

Effective communication was one of the most desirable characteristics expressed by parents in regard to working with adapted physical education teachers. According to participants, ongoing communication allowed parents to know what their children were learning in school. Parents desired this information so they could reinforce skills at home. These findings were in accordance with research findings among Hispanic families of children with disabilities (Columna et al., 2008). Parents wanted to know how they could help improve motor skills for their children, but due to the lack of communication with adapted physical education teachers, parents did not know what to do. Similar findings have been reported in the special education literature as well (Hetherington et al., 2010; Madson-Ankeny et al., 2009; Russell, 2005), in which importance of communication was highlighted as an important component to support educational services.

Some parents in the current study wanted to be involved in their children's physical educational program, but they lacked the skills and knowledge of how to initiate collaboration with the teacher. Moreover, they indicated that they did not know what questions to ask or how they could assist the adapted physical education teacher. These findings were contrary to those reported by An and Goodwin (2007) in which mothers of children with spina bifida were actively involved in the educational process of their children in which they provided ideas that teachers could use to modify several activities in which their children participated. Participants in the An and Goodwin's study were involved in disability sports, were familiar with disability sports programs, were able to share sport information with teachers, and served as advocates for their children's physical education program. In the current study, parents were frequently disconnected from the adapted physical education services and had little interaction with the teachers in the physical education program. A possible explanation for this difference may be that parents often focus more on speech and language development and academic performance rather than physical activity. Another explanation may be the lack of communication from the adapted physical education teacher.

Collaboration between parents and teachers enhances the quality of instruction and services for children with disabilities in physical education settings (An & Goodwin, 2007; Castaneda & Sherrill, 1999). In one positive collaboration example by Castaneda and Sherrill (1999), parents

reported that they were very pleased with the little league coaches because they shared ideas for modifications and other community programs in which the family could be involved. One participant in this study also discussed the supportive value of having ongoing communication with an adapted physical education teacher. In this case, the adapted physical education teacher provided information in print and braille regarding progress and exercise plans to help reinforce skills at home. The parents highly valued this collaborative process.

### ***Parental Expectations Toward IEP Meetings and Transition***

One of the roles of adapted physical education teachers is to serve as advocates for children with disabilities and their families (Kelly, 2006). The IEP meeting can be an excellent venue for parents to be heard (An & Goodwin, 2007), for the exchange of information between teachers and parents, and to enhance collaboration and advocacy strategies (Lytle, Lavay, Robinson, & Huettig, 2003). According to several parents, they received information from everyone on the IEP team regarding their child's performance, except from the adapted physical education teacher. This void was often because the adapted physical education teacher did not attend the IEP meeting. Attendance at IEP meetings allows adapted physical education teachers to exchange information and knowledge with all members of the team, but most importantly, the parents. As found in the current study, parents seemed to be unaware of the legal requirement that all service providers must attend the IEP meeting. IDEIA stipulates that when professionals will be absent from an IEP meeting, they must notify parents in advance. School districts are required to share this information with parents. If parents were aware of this legal requirement, they may be more apt to expect all service providers to attend the IEP meeting.

Garriott, Wandry, and Snyder (2000) found that when attending IEP meetings, parents wanted to be informed about the educator's plans for the child rather than to be equal participants in the development of the plan. As the results of the current study demonstrated, the lack of participation at the IEP meetings was perceived by parents as a lack of commitment on the part of the teacher. If the adapted physical education teacher was absent from IEP meetings, they could not advocate for the child. Moreover, if professionals did not attend IEP meetings, collaborative work between teachers and parents was seriously impeded.

Teacher preparation programs are doing an "excellent job" preparing teacher candidates to work directly with children with disabilities. However, it is also important that these programs emphasize the importance of collaborative work between professionals and parents of children with

disabilities (Lytle et al., 2003). This collaborative work enhances not only the services provided for children with disabilities but also reduces parental fears, particularly during the transition process.

Although successful transition to school for children with disabilities is imperative to all families, it has been reported that parents have experienced stressful transitions for children as young as 5 years (Rous, Myers, & Stricklin, 2007). The transition process needs to start early, prior to the natural transition points (Roth & Columna, 2011). It has been reported that parents are not equipped for transitions (Hetherington et al., 2010; Madson-Ankeny et al., 2009). One way to equip parents for transitions is through ongoing communication. Parents in the current study indicated that they were fearful of the transition of their child from the school to the community. In previous studies (Roth et al., 2007; Russell, 2005), parents expressed the desire to know more about the transition process prior to their child graduating from school. Following graduation, parents were not familiar with supports and services for their adult child. In the current study, one parent commented, "You don't know what you don't know." For this reason, constant communication with parents throughout the year is important for service provisions, advocacy, family support, and advance planning for life as an adult.

Parents of children with disabilities have varying needs (e.g., information, support, practical tools) and may develop expectations based on previous experience, the media, or school information (Russell, 2005). If teachers communicate and share information regarding physical education services, parents will understand the importance of physical activity and be aware of programs and supports during and after the child's experience in school. For many individuals with disabilities, recreational and physical activities are a primary focus after secondary school.

Rous et al. (2007) identified several strategies for professionals to help support families during transitions for young children with special needs. Some of these strategies included written guidelines for the transition process and plan, training opportunities for staff, program visitations, preparation of families and children for transition, and the sharing of information among parents and staff. After experiencing successful transitions, parents in the Rous et al. study were able to identify tactics that were helpful in planning and preparing their child for new settings and services. It is important to remember that for transition planning to be effective, ongoing communication needs to be present.

### ***Practical Applications, Future Research, and Conclusion***

Several recommendations for practical applications can be mentioned as a result of this study. First, special educators

and adapted physical education teachers can identify ideas to enhance communication and seek strategies that promote physical activity for families of children with disabilities. As participants mentioned, they lack not only information regarding physical activity but also knowledge in terms of how to modify activities. For this reason, the adapted physical educator plays an important role in the IEP meeting in providing families with ideas and quality instruction.

Future research is needed to explore teachers' perception of the effect of ongoing communication with adapted physical education teachers and parents of children with disabilities. In addition, research is needed to explore reasons why adapted and physical education teachers are including or not including parental expectations and interests into their program. Moreover, it is important to identify what strategies teachers are using to promote parental involvement into their physical education programs. Why aren't teachers sharing information with parents, and what factors are contributing to lack of attendance at IEP parents' meetings? Future research is needed to address these critical issues.

In conclusion, this research may provide the field of adapted physical education, special education, and teacher preparation programs with essential information regarding the expectations and desires of parents of children with disabilities. By acknowledging parental expectations and meeting family needs, educators provide more effective services, including physical activity, to children with disabilities. The promotion of physical activity in school by adapted physical education teachers may affect the degree of participation by children and their families at home and within the community. In addition, the results of the current study emphasize the importance of including adapted physical educators as part of the multidisciplinary team.

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